



STATE OF TENNESSEE  
DEPARTMENT OF FINANCE AND ADMINISTRATION  
DIVISION OF MENTAL RETARDATION SERVICES  
ANDREW JACKSON BUILDING, 15<sup>th</sup> FLOOR  
500 DEADERICK STREET  
NASHVILLE, TENNESSEE 37243

**DMRS Title VI Self-Survey**  
**Survey Period**  
**July 1, 2007 – June 30, 2008**

Company \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

DMRS Services  
Provided

Agency Title VI Coordinator \_\_\_\_\_ Telephone number: \_\_\_\_\_

**PLEASE ANSWER ALL QUESTIONS ON THIS SURVEY.**

Date of Survey: \_\_\_\_\_ Type of Survey: ☐ Initial ☐ Annual ☐ Corrective

**I. TITLE VI COMPLAINTS**

1. Number of Title VI complaints filed during the survey period.  
(Please attach a copy of the complaint.) \_\_\_\_\_
2. Number of Title VI investigations conducted. \_\_\_\_\_
3. Number of Title VI complaints resolved during the survey period. \_\_\_\_\_
4. Number of Title VI complaints forwarded to DMRS Regional Office  
or Central Office. \_\_\_\_\_

**II. SERVICE RECIPIENT NOTIFICATION**

5. Are new service recipients informed of their Title VI rights? ☐ Yes ☐ No
6. Who is responsible for informing your service recipients of their rights under  
Title VI? \_\_\_\_\_
7. How is the process of informing service recipients documented?

**Explain:**

8. What methods do you use to ensure that your service recipients are clearly aware of their rights under  
Title VI? (Please check all that apply.)

☐ Verbally at Orientation

☐ Annual Staffing

☐ Training Films

- ☐ Mail Outs
 ☐ Brochures/Posters
 ☐ Home Visits  
☐ Specially Adapted Training Packets
 ☐ Information Packet/Service Recipient/ Parent Handbook  
☐ Other

9. How often are service recipients re-informed of their Title VI rights?  
☐ Annually
 ☐ Semi-Annually
 ☐ Quarterly
 ☐ Other
10. If a service recipient has a conservator, does the conservator receive all of the information that the service recipient receives about Title VI Rights? ☐ Yes ☐ No
11. Are posters containing Title VI information prominently displayed within the facility? ☐ Yes ☐ No
12. Do these posters show the name of your agency's Local Title VI Coordinator to whom complaints should be referred? ☐ Yes ☐ No

### III. LIMITED ENGLISH PROFICIENCY (LEP) ASSESSMENT

***Department of Health and Human Services (HHS) regulations, 45 CFR 80.3(b)(2), require all recipients and sub-recipients of federal financial assistance from HHS to provide meaningful access to LEP persons.***

***Please assess, as accurately as possible, the following:***

13. What is the composition by percentage of your geographical service area?  
*(Use census data for the counties you serve.)*

Percentage of non-minority	_____
Percentage of minority	_____
African-American	_____
Asian	_____
Hispanic	_____
Other	_____

14. Your agency's contact with an LEP individual from different language groups seeking assistance.

Comment:

15. Nature and importance of service activities to LEP persons. Would denial or delay of access to services or information your agency provides have serious or even life-threatening implications for LEP individuals? ☐ Yes ☐ No

Comment:

16. Are existing agency resources meeting the needs of LEP persons? ☐ Yes ☐ No

If no, please explain:

17. Does your agency have a contract for interpreter services? ☐ Yes ☐ No

If no, please explain.

**IV. TITLE VI POLICIES** (Please include current copies of all policy statements.)

18. Does your agency have a written policy stating that services will be provided to all persons without regard to race, color, or national origin? ☐ Yes ☐ No

19. Does your agency have written procedures for hearing and reviewing Title VI complaints? ☐ Yes ☐ No

20. Does your agency have a written policy on how service recipients are informed about Title VI? ☐ Yes ☐ No

If no, please explain.

21. Does your agency have a written policy on how service recipients with Limited English Proficiency will receive services and benefits for which they are eligible? ☐ Yes ☐ No

22. Does your agency have a contract for interpreter services? ☐ Yes ☐ No

If no, please explain.

**V. TRAINING**

23. Are new employees trained on Title VI within 30 days of beginning services? ☐ Yes ☐ No

24. What methods do you use to ensure that your employees are clearly aware of their responsibilities under Title VI? (Please check all that apply.)

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Career Development | <input type="checkbox"/> New Employee Newsletter | <input type="checkbox"/> Information Packets |
| <input type="checkbox"/> In-Service Policy  | <input type="checkbox"/> Brochures/Posters       | <input type="checkbox"/> Annual Staffing     |
| <input type="checkbox"/> Training Films     | <input type="checkbox"/> ID Employee Handbook    | <input type="checkbox"/> Orientation         |
| <input type="checkbox"/> Personnel Manual   | <input type="checkbox"/> Other                   |  |

25. Does each employee's personnel file contain acknowledgement of training and penalties for non-compliance? ☐ Yes ☐ No

26. Has your Agency Title VI Coordinator attended Title VI training? ☐ Yes ☐ No

27. Has your Agency Title VI Coordinator had training on DMRS Title VI requirements? ☐ Yes ☐ No

28. What additional training beyond the training offered to all employees has your Agency Title VI Coordinator received?

**Explain:**

## **VI. FACILITY**

***If you provide residential or 24-hour services and you make room assignments, indicate whether you have a written policy regarding room transfers within the facility which include the following:***

29. The specific factors considered when processing a request for a room transfer. ☐ Yes ☐ No
30. The reason for transfer. ☐ Yes ☐ No
31. The room number from which the service recipient is transferred. ☐ Yes ☐ No
32. The room number to which the service recipient is transferred. ☐ Yes ☐ No

## **VII. OUTREACH**

***One good way to evaluate your agency's Title VI Compliance may be to seek feedback from the community.***

33. Did your agency conduct any public education or outreach efforts directly related to Title VI during the survey period. ☐ Yes ☐ No
34. Explain with particularity whether your agency conducted any public educational outreach efforts directly related to Title VI.

**Explain:**

35. Do you plan to conduct any future public education or outreach activities/efforts? ☐ Yes ☐ No  
(next fiscal year)

## **VIII. TITLE VI PROPOSED PROGRAM ACTIVITIES**

## **IX. GENERAL COMMENTS**

If you have any questions, please contact:

Brenda Clark (615) 253-6811

Please return this survey to the following e-mail address:

[annie.bernard@state.tn.us](mailto:annie.bernard@state.tn.us)